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Un	PTO/SB/01 (12-97) Approved for use through 9/30/00.OMB 0651-0032 Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.										
_		FOR UTILITY	OR Attor	ney Docket Number	22477-712	2477-712					
١,	DECLARATION FOR UTILITY OR DESIGN			Named Inventor	Eric Lietz						
	PATENT A	PPLICATION		COMPLETE IF KNOWN							
	(37 CF	FR 1.63)	PCT	Application Number	PCT/US00/2	2078					
	Submitted with Initial	Declaration Submitted after	er Initial I.A. F	iling Date	August 11, 200	00					
		Filing (surcha	rge U.S.	Application Number	10/069,442						
	Filing OR	(37 CFR 1.16) required)		Filing Date	February 13, 2	2002					
			Grou	p Art Unit	Unknown						
			Exar	niner Name	Unknown						
	My residence, post office address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: RANDOM MUTAGENESIS AND AMPLIFICATION OF NUCLEIC ACID (Title of the Invention)										
the specification of which is attached hereto											
	OR was filed on (MM/	(DD/YYYY) 02	/13/2002	as United States A	Application Number of	or PCT International					
	pplication Number 10/069,				•						
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.											
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.											
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or []365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.											
h	Prior Foreign Application Number(s)	Country	Foreign Filing Dar (MM/DD/YYYY)	e Priority Not Claimed	Certified YES	Copy Attached? NO					
卜	/ variou(o)										
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 \Box ш Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

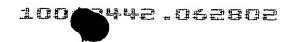
Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.







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DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

between the filing of	date of t	he prior applicati	on and t	ne nation	ial or PC					п.		
U.S. Parent Application or PCT Parent Number						F	Parent Filing Date (MM/DD/YYYY)				itent Number plicable)	
09/374,274 PCT/US00/22078						1	August 13,1999 August 11,2000					
Additional U.S. or PCT international application numbers are listed on a su							upplemental priority data sheet PTO/SB/028 attached hereto.					
As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: Customer Number 021971 Place Customer Number Bar Code Label here												
N	Registration Number				Name			Registration Number				
	lame_											
Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.												
Direct all correspondence to: Customer Number or Bar Code Label OR □ Correspondence address below									address below			
Name	Shirle	Chen										
Address	Wilson	n Sonsini Goodrich & Rosati								·····		
Address	650 P	age Mill Road										
City	Palo A	Alto			r	State	State CA		94304	94304		
Country U.S.			Telephone 650-493-9							650-493-6811		
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.												
Name of Sole or First Inventor: A petition has been filed for this unsigned inventor									ntor			
Given Name (first and middle (if anŷ)							Family Name or Surname					
\. 9C	7/10				Lietz							
Inventor's Signature			Wwx "			n A	A		Date	Date 6-67		
Residence: City		Santa Cruz	-\ st	ate	CA	Cour	itry	us	Citize	nship	us	
Post Office Addre	4545 Bain Ave	545 Bain Ave., Santa Cruz, CA 95062										
P st Office Addre						т						
City Santa Cruz				ate	CA	ZIP		95062	Count		US	
☐ Additional inve	entors ar	e being named o	on the	suppler	mental Ad	dditional In	ventor((s) sheet(s) P	10/SB/02/	attache	ed hereto:	